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WHAT IS CLAIMED IS:

1. A method of inhibiting the proliferation of a peripheral blood mononuclear cell population, comprising contacting the peripheral blood mononuclear cell population with an amount of rhesus or human CMV IL-10 sufficient to inhibit the proliferation of the peripheral blood mononuclear cell population.

2. The method of claim 1, wherein the peripheral blood mononuclear population is contacted with rhesus CMV IL-10.

3. The method of claim 1, wherein the peripheral blood mononuclear population is contacted with human CMV IL-10.

4. The method of claim 1, wherein peripheral blood mononuclear, cells are proliferating when the contacting step is performed.

5. The method of claim 1, wherein the contacting occurs *in vitro*.

6. The method of claim 1, further comprising adding an agent that induces the peripheral blood mononuclear cells to proliferate.

7. The method of claim 1, wherein the level of IFN-γ secreted by the peripheral blood mononuclear is cells is detectably reduced responsive to the contacting step.

8. The method of claim 1, wherein the level of TNF-α secreted by the peripheral blood monocular cells is detectably reduced responsive to the contacting step.

9. The method of claim 1, further comprising monitoring the proliferation level of the peripheral blood mononuclear cells to determine a reduction in the proliferation level responsive to the contacting step.

10. The method of claim 1, further comprising monitoring secretion of IFN-γ or TNF-α to determine a reduction in level of secreted IFN-γ or TNF-α responsive to the contacting step.

11. The method of claim 1, wherein the mononuclear proliferating cells are rhesus or human cells.

12. A method of reducing cytokine production of a monocyte cell population, comprising contacting the monocyte cell population with an amount of rhesus or human CMV IL-10 sufficient to reduce cytokine production by the monocyte cell population.

13. The method of claim 12, wherein the contacting occurs *in vitro*.

14. The method of claim 12, wherein the level of IFN-γ secreted by the monocytes is detectably reduced responsive to the contacting step.

15. The method of claim 12, wherein the level of TNF-α secreted by the monocytes is detectably reduced responsive to the contacting step.

16. The method of claim 12, wherein the level of GM-CSF secreted by the monocytes is detectably reduced responsive to the contacting step.

17. The method of claim 12, wherein the level of IL-1α secreted by the monocytes is detectably reduced responsive to the contacting step.

18. The method of claim 12, wherein the level of IL-6 secreted by the monocytes is detectably reduced responsive to the contacting step.

19 The method of claim 12, further comprising monitoring the cytokine levels of the monocytes to determine a reduction in the proliferation level responsive to the contacting step.

20. The method of claim 12, further comprising monitoring secretion of IFN-γ, TNF-α, GM-CSF, IL-1α or IL-6 to determine a reduction in level of secreted IFN-γ, TNF-α, GM-CSF, IL-1α or IL-6, responsive to the contacting step.

21. A method of preventing or treating an immune disorder in a patient, comprising:

administering rhesus CMV IL-10 or human CMV IL-10 to a patient suffering from or susceptible to the disorder in a dosage sufficient to inhibit proliferation of lymphocytes in the patient, and thereby prevent or treat the disorder.

22. The method of claim 21, wherein the rhesus CMV IL-10 or human CMV IL-10 is a component of a pharmaceutical composition further comprising a pharmaceutically acceptable carrier.

23. The method of claim 21, wherein the pharmaceutical composition is sterile, substantially isotonic and prepared under GMP conditions.

24. The method of claim 21, wherein the patient is suffering from or susceptible to an immune disorder selected from the group consisting of graft versus host disease, an autoimmune disease, an inflammatory response, a pathologic delayed type hypersensitivity response, endotoxin-induced toxic shock, granulomatis disease, psoriasis, uveitis, systemic lupus erythematous, multiple sclerosis and contact-dermatitis.

25. The method of claim 21, further comprising monitoring proliferation of the lymphocytes in the patient to detect a reduction in the level of proliferation responsive to the administering step.

26. The method of claim 21, further comprising monitoring a symptom of the patient, to detect amelioration or prevention of the symptom responsive to the administering step.

27. The method of claim 21, wherein the patient is suffering from the disorder.

28. The method of claim 21, wherein the patient is susceptible to the disorder.

29. The method of claim 28, wherein the patient is an organ transplant patient.

30. The method of claim 29, wherein the organ is a kidney.

31. The method of claim 30, wherein the IFN-α levels are detectably decreased responsive to the administering of rhesus or human CMV IL-10.

32. The method of claim 21, wherein the inflammatory disorder is a chronic inflammatory response.

33. The method of claim 32 wherein the chronic inflammatory disease is selected from the group consisting of rheumatoid arthritis, inflammatory bowel disease, Crohn's disease, ulcerative colitis, Graves' disease, Hashimoto's thyroiditis, systemic lupus erythematosus, multiple sclerosis, scleroderma, and insulin-dependent diabetes mellitus.

34. The method of claim 21, wherein the inflammatory disorder is an allergic response.

35. The method of claim 34, wherein the inflammatory disorder is asthma.

36. The method of claim 21, wherein the patient is suffering from a type T_H1 immune response to transplanted graft.

37. The method of claim 36, wherein the transplanted graft is an organ selected from the group consisting of cornea, lung, heart, liver, bone marrow, kidney, pancreas, blood, and skin.

38. The method of claim 25 wherein the immune disorder is leukemia.

39. A method of ameliorating symptoms of hepatitis in an animal host, comprising administering to the animal infected with hepatitis virus an effective dosage CMV IL-10 sufficient to ameliorate at least one of the symptoms of hepatitis.

40. The method of claim 39, wherein the administering step ameliorates damage liver in the patient.

41. The method of claim 39, wherein the administering step ameliorates liver disease or liver fibrosis.

42. A method of treating or preventing a respiratory viral infection in a patient, comprising administering rhesus or human CMV IL-10 to the patient suffering from or susceptible to a virally infected respiratory system in a dosage sufficient to ameliorate at least one symptom of the respiratory viral infection.

43. A method for reducing an *in vivo* inflammatory response characterized by substantially elevated levels of at least one cytokine selected from the group consisting of IL-1α, GM-CSF, IFN-γ and TNF-α, comprising administering to the patient afflicted with such an inflammatory response or at risk for developing such an inflammatory response, an effective dosage of rhesus CMV IL-10 or human CMV IL-10 to substantially lower the levels of said cytokines.

44. A method of preventing or treating the symptoms of an inflammatory response, comprising administering rhesus CMV IL-10 or human CMV IL-10 to the patient suffering from or susceptible to an inflammatory response in a dosage sufficient to ameliorate at least some of the symptoms of the inflammatory condition.

45. The method of claim 44, further comprising monitoring proliferation of the lymphocytes in the patient to detect a reduction in the level of proliferation responsive to the administering step.

46. The method of claim 44, further comprising monitoring a symptom of the patient, to detect amelioration or prevention of the symptom responsive to the administering step.

47. The method of claim 44, wherein the patient is suffering from the disorder.

48. The method of claim 44 wherein the inflammatory response is a chronic inflammatory response.

49. The method of claim 48 wherein the chronic inflammatory disease is selected from the group consisting of rheumatoid arthritis, Crohn's disease, ulcerative colitis, Graves' disease, Hashimoto's thyroiditis and insulin-dependent diabetes mellitus.